## PART B - FEE(S) TRANSMITTAL

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

APPLICATION N	O. FILIN	G DATE F	IRST NAMED IN	VENTOR	ATTORNEY D	OCKET NO.	CONFIRMATION NO.	
10/594,127		09/25/2006		Akio SUGIHARA		91	8975	
10/25/2000		ANIO SUGIRA	AND SUUINAKA		<b>71</b>	6713		
TITLE OF INVENTIO	N: COMPOSITION	OF SOLIFENACIN	OR SALT THERE	EOF FOR USE IN	SOLID FORMULA	ATION		
APPLN, TYPE	SMALL ENTITY			ION PREV.	PAID ISSUE FEE	TOTAL FEE(S	DATE DUE	
nonprovisional	NO	\$1510.00	\$0.00		\$1,510.00	\$0.00	05/07/2011	
EXAMINER			ART UNI	ART UNIT CLAS				
Niloofar RAHMANI			1625	5	14-305000			
1. Change of correspond	dence address or ind	ication of "Fee Addres	ss" (37 CFR 1.363	2. For printing	on the patent front p	age list 1	Sughrue Mion, PLLC	
					(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2			
03-02 or more recent) ATTACHED. Use of a Customer Number is required.					(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or			
a					agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME								
PLEASE NOTE: Unles recordation as set forth						entified below, the	document has been filed for	
(A) NAME OF ASSIG		DENCE: (CITY and S		_	<b></b>			
Astellas Pharma Inc.	Tokyo, Ja	pan						
Please check the approp	oriate assignee categ	ory or categories (will	l not be printed on t	the patent): 🗆 Inc	lividual ☑ Corporati	on or other private	group entity  Government	
4a. The following fee(s) are submitted:			4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)				
☑ Issue Fee			☐ A check	☐ A check is enclosed.				
☐ Publication Fee (No small entity discount permitted)			-	☐ Payment by credit card. Form 1310-2038 is attached.				
☐ Advance Order - # of Copies			overpayme	$\Box$ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880.				
		☑ The USPTO is directed and authorized to charge all required fees to Deposit Account No. 19-4880. Please also credit any overpayments to said Deposit Account.						
5. Change in Entity Sta	•	•					25 000 1 25/ 2/22	
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.								
					nd Publication	Fee (if any)	or to re-apply any	
previously paid		• •						
NOTE: The Issue Fee a party in interest as show					he applicant; a regis	tered attorney or a	gent; or the assignee or other	
Authorized Signature		Jennifer M. Hayes/	•	Date	Adjustment 12/17/2010 01 FC:1501	date: 05/09/2 INTEFWAY 6000		
Typed or Printed Name		Jennifer M. Hayes		Registration No	о.	40,641		
Modified PTOL-85 (Rev. 08/08 Approved for use through 08/31/2010.					05/09/2011	MBLANCO1 660	00004 10594127	
					91 FC:1591		1510.03 09	

01 FC:1501